

**DEPARTMENT OF HEALTH AND HUMAN SERVICES
PUBLIC HEALTH SERVICE
CENTERS FOR DISEASE CONTROL AND PREVENTION
OFFICE OF COMMUNICATION
ATLANTA, GEORGIA 30333**

REQUEST FOR TASK ORDER PROPOSAL

Date Issued: June 25, 2004

Date Response Due: July 19, 2004

QUESTION PERIOD: No later than July 2, 2004

Request for Task Order Proposal (RFTOP) NO.: 187 (CDC 7)

Title: HPV Message Development and Testing Project

Contract reference: This Request for Task Order Proposal is consistent with the purposes for which the NIH Public Information and Communication Services (PICS) contracts for health communication services were awarded. This RFTOP includes tasks described in the contract as

- Tasks
1. Communication Research
 5. Outreach/Promotion
 7. Outreach minority/underserved populations
 8. Product development
 9. Graphic design
 11. Communication meeting/conference support

Page Suggestion:

All proposals should be submitted electronically in Word format. Proposals should not exceed 25 pages including resumes of proposed project participants.

Budget format suggestion: Budget proposal should be submitted as an appendix with separate line item cost for each task outlined in the SOW.

Funding Range: (check one)

- ☐ Under \$100,000
- ☐ Over \$100,000 but less than \$300,000
- ☒ Over \$300,000 but less than \$500,000
- ☐ Over \$500,000 but less than \$700,000
- ☐ Over \$700,000 but less than \$1,000,000
- ☐ Over \$1,000,000

Background:

Genital human papillomavirus (HPV) infections are sexually transmitted infections of increasing health importance to public health officials. Genital HPV infections are widespread among adults who have been sexually active and are estimated to have the highest incidence of any sexually

transmitted disease (STD) in the U.S. More than 100 different types of HPV have been detected and approximately 30 types are known to cause infection of genital mucosal sites. The International Agency for Research on Cancer and the National Institutes of Health have concluded that the high-risk genital HPV types act as carcinogens in the development of cervical cancers. Although cervical cancer screening programs have been implemented in the U.S. and other developed countries for decades, public health agencies have just begun to establish programs for primary prevention of genital HPV infection or are attempting to establish ways to modify existing cancer prevention programs to take advantage of the associated role of HPV.

The Division of Sexually Transmitted Disease Prevention's (DSTDP) Genital HPV Infection and Sequelae Report, dated December 1999, makes several recommendations for programmatic public health/prevention activities including HPV testing as an option in the triage of women with ASCUS Pap smears, promulgation of a "standard script" for providers to use in education/counseling of patients with HPV infection, and establishment of key messages about HPV for use in professional education. The report also recommends, in conjunction with the development of professional education materials, patient education materials be developed and distributed widely, and that their use and/or adaptation by groups involved in patient education be strongly encouraged.

Recognizing and acknowledging the etiologic role of high-risk types of genital HPV infection in cervical cancer, Congress, in early 2001, mandated HPV prevention activities and education programs in H.R. 5656 SEC. 317P (b) (1) (A); H.R. 5656 SEC. 371P (b) (1) (B); and H.R. 5656 SEC. 317P. This mandate, combined with the recommendations made in the DSTDP's report, clearly indicates a role for health communication interventions that support the range of interventions that may be used to improve the HPV testing and prevention programs for a finitely defined target audience.

The DSTDP has conducted literature and material reviews of existing information on HPV. In addition, several formative research projects were conducted with health care providers (2002), patients and their partners (2003), and the general public (2003) to identify their HPV knowledge, attitudes, practices, and behavioral intent. The findings indicate a frustration with inconsistent messages, confusing and often incomplete information gaps in scientific recommendations, as well as a lack of culturally appropriate materials for various segments of the population. The studies also provide useful information for the development of creative briefs and movement toward the development and testing of awareness, prevention, information, etc., messages and format delivery.

Communication Goals:

- (1) Identify appropriate framing or overarching theme of genital HPV infection messages that will resonate with the target audiences
- (2) Identify messages that use the best available science and that avoid or minimize audience confusion and stigmatization (of HPV & cervical cancer), while informing audiences about:
 - a. HPV (e.g. What is it? How is it transmitted? Etc.)
 - b. Impact of HPV (prevalence, potential consequences)

- c. Prevention of genital HPV infection and complications (e.g., abstinence, partner selection, condoms, Pap smear screening)
 - d. Role of HPV vaccine
 - e. HPV prevention in the context of other reproductive health issues (other STDs such as chlamydia, pregnancy, etc.)
- (3) Establish a coalition of interested HPV/STD organizations and partners to develop and disseminate accurate and complete health messages to target audiences

Description of work:

Contractor will work with the Principal Investigator/Technical Monitor, and other DSTDP leadership (e.g., Director, Deputy, Branch Chiefs, Subject Matter Experts) to establish a foundation for review and decision process for the project.

TASK 1. HPV Scientific Messages

In coordination with the PI (technical monitor) convene a meeting of CDC personnel and other designated individuals to review HPV Report to Congress and guide scientific content of messages that will be used for this project. Meetings will be at CDC. Contractor will be responsible for contacting participants, inviting, and providing all logistical support except facilities and audio visual support requirements (which will be provided by CDC).

TASK 2. Concept Theme/Message Development Testing

Develop and test appropriate communication concepts, messages, images, & formats for effectively reaching the target audiences (incl. low-literacy, Spanish-speaking) with HPV information that meets Congressional mandate. The intent of the messages will clarify audience confusion and avoid or minimize audience fear and frustration, as well as the stigmatization of HPV & cervical cancer, etc. Contractor should recommend the number of focus groups needed and geographical dispersion (including segmentation options) to reflect national demographics. Contractor must remain in compliance with OMB requirements and not ask the same question of more than 9 individuals per focus group.

a. Create several and test a minimum of three communication concepts to serve as an umbrella framing for HPV general population health communication awareness efforts.

b. Create several and test a minimum of three culturally sensitive and appropriate awareness messages, including various images, layouts, and formats for use with each target audience, based on segmentation decisions made and findings from focus groups, but at a minimum minority and low literacy. Contractor will meet with senior leadership to discuss messages that will be tested and after message testing provide a report on the messages, images, and format findings.

c. Create several and test a minimum of three messages including various images, layouts, and formats designed to improve patient/provider interaction regarding HPV (particular emphasis should be placed on improving provider interactions with patients who are low-

literacy, Spanish-speaking) regarding HPV. Contractor is expected to meet with some of the Principal Investigators of previous HPV formative research efforts with patients to review their efforts and findings on patient counseling and message development. Contractor will meet with senior leadership to discuss messages that will be tested and after message testing provide a report on the messages, images, and formats findings.

TASK 3. Facilitation and Report of meetings w/key partners & stakeholder

In coordination with the PI/technical monitor convene at least two meetings with key partners and stakeholders to (a) garner support for CDC's HPV public education efforts, and (b) assess partner needs for & feasibility of public outreach/dissemination efforts. Contractor will facilitate the meetings and be responsible for contacting, inviting, and providing refreshments. CDC will provide the facility and audio visual support requirements. Contractor will provide summary report on meeting discussion and outcomes.

TASK 4. Newsletter

Design a newsletter template (no more than 4 pages front and back) for use by partners and other associations/organizations to include in their internal education programs to update health care providers about latest developments in HPV.

Items from CDC appropriate for preparation of proposals:

- a. Copies of all available formative research conducted with health care providers, patients and their partners, and general population (upon request)
- b. STD Communication Database <http://www.cdc.gov/std/healthcomm/>
- c. The Division of Sexually Transmitted Disease Prevention's (DSTDP) Genital HPV Infection and Sequelae Report, dated December 1999
<http://www.cdc.gov/nchstp/dstd/HPVInfo.htm>
- d. Report to Congress Prevention of Genital Human Papillomavirus Infection
<http://www.cdc.gov/nchstp/dstd/HPVInfo.htm>

Item from CDC appropriate for task completion:

- a. Preliminary recommendations of potential partners, organizations, agencies.
- b. Facilities for meetings (including audio visual support)
- c. Access to DSTDP senior leadership, subject matter experts as needed

Deliverables:

Task I: HPV Content Document 45 days from Award

TASK II: Concept Theme/Message Development Testing
Activities and final products to be as listed below:

- a. Creative Brief for each target audience 15 days after completion of Task 1
- b. Concept/Themes Development 30 days after

	completion of Task IIa
c. Concept/Themes Field Testing completed (FG)	60 days after completion of Task IIb
d. Concept/Themes Testing Report/Briefing (2 nd Meeting)	15 days after completion of Task IIc
e. Message/Product Development	15 days after completion of Task IId
f. Message/Product Field Testing completed(FG)	60 days after completion of Task II e
g. Message/Product Report/Findings (3 rd meeting)	15 days after completion of Task II f
TASK III: Facilitation and Report of meetings w/CDC personnel, key partners & stakeholder	
1 st meeting	30 days from award
2 nd meeting	15 days after completion of Task IIc
3 rd meeting	15 days after completion of Task II f
TASK IV: Newsletter first edition/template	30 days after completion of Task II f

All materials developed and submitted in the final reports under this task order will be delivered in camera-ready hard copy, as well as digital format suitable for posting on Internet (including ideas not selected for testing).

All final deliverables developed under this task order are the sole property of the Federal Government with unlimited usage rights.

Period of Performance: Through June 31, 2005

Special Clearances:

Check all that apply:

☐ OMB
☒ Human Subjects
☐ Privacy Act

Production Clearances:

☒ 524 (concept)
☐ 524a (audiovisual)
☐ 615 (printing)

Evaluation Criteria:

A. Award: This task order will be awarded to the contractor whose proposal is considered to be the most advantageous to the Government, price and other factors identified below considered. The Government will not make an award at a significantly higher overall cost to the Government to achieve only slightly superior performance.

B. Technical Evaluation:

Technical evaluation for this RFTOP are as follows:

Criteria	Points or relative <u>Value of criteria</u>
Technical Approach	<u>25</u>
Staffing and Management	<u>15</u>
Similar Experience	<u>25</u>
Expert Recommendations	<u>35</u>

Technical Approach:

Contractors are to provide a discussion of their technical approach for providing the services required for this task order.

This criteria will be evaluated according to the soundness, practicality, and feasibility of the contractor's technical approach for providing the services required for this task order.

Staffing and Management:

Contractors are to provide (1) a staffing plan that demonstrates their understanding of the labor requirements for this task order; and (2) HPV clinical, communication, and behavioral expertise; and 3) a management plan that describes their approach for managing the work, to include subcontract management if applicable.

This criteria will be evaluated according to the soundness, practicality, and feasibility of the offeror's staffing and management plans for this task order.

Similar Experience:

Provide information reflecting the contractor's organizational capacity for projects similar in complexity and scope with specific emphasis on communicating controversial and sensitive health information.

This criteria will be evaluated to determine appropriate experience of assigned personnel.

Expert Recommendations:

Contractors are to provide ideas and/or suggestions about creative and/or innovative ways to accomplish both processes and products described in this task.

This criteria will be evaluated by examining the creative ideas offered and the rationale that supports the ideas presented.

C. Cost Evaluation: A cost analysis of the cost proposal shall be conducted to determine the reasonableness of the contractor's cost proposal.

Proposed Technical Monitor: TO BE ANNOUNCED

Project Officer: TO BE ANNOUNCED.